

Docket No. LS/0003.01

PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

#9  
T.D.  
11/10/03

<b>CHANGE OF CORRESPONDENCE ADDRESS <i>Application</i></b>  Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Application Number	09/588,875
	Filing Date	June 6, 2000
	First Named Inventor	Kirani
	Art Unit	2152
	Examiner Name	Rinehart, Mark
	Attorney Docket Number	LS/0003.01

Please change the Correspondence Address for the above-identified application to: <input checked="" type="checkbox"/> Customer Number <b>28653</b> <span style="float: right;">→</span>																			
<input type="checkbox"/> <i>Type Customer Number here</i>																			
<b>OR</b>																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><input type="checkbox"/> Firm or Individual Name</td> <td>John A. Smart</td> </tr> <tr> <td>Address</td> <td></td> </tr> <tr> <td>Address</td> <td>708 Elcason Hill Rd., #201</td> </tr> <tr> <td>City</td> <td>Los Gatos</td> <td>State</td> <td>CA</td> </tr> <tr> <td>Country</td> <td colspan="3">U.S.A.</td> </tr> <tr> <td>Telephone</td> <td>(408) 884-1507</td> <td>Fax</td> <td>(408) 490-2853</td> </tr> </table>		<input type="checkbox"/> Firm or Individual Name	John A. Smart	Address		Address	708 Elcason Hill Rd., #201	City	Los Gatos	State	CA	Country	U.S.A.			Telephone	(408) 884-1507	Fax	(408) 490-2853
<input type="checkbox"/> Firm or Individual Name	John A. Smart																		
Address																			
Address	708 Elcason Hill Rd., #201																		
City	Los Gatos	State	CA																
Country	U.S.A.																		
Telephone	(408) 884-1507	Fax	(408) 490-2853																

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

OFFICIAL

FAX RECEIVED

AUG 29 2003

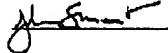
GROUP 2100

I am the :

- Applicant/Inventor.
- Assignee of record of the entire interest.
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed Name **John A. Smart**  
Attorney of record

Signature



 Digitally signed by John A. Smart  
 Date: 2003.08.28  
 11:18:03 -07'00
 

Date

August 28, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of **1** forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Docket No. LS/0003.01

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0851-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

		Application Number	09/588,875
		Filing Date	June 6, 2000
		First Named Inventor	Kirani
		Art Unit	2152
		Examiner Name	Rinehart, Mark
Total Number of Pages in This Submission	2	Attorney Docket Number	LS/0003.01

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

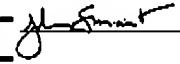
FAX RECEIVED

AUG 29 2003

GROUP 2100

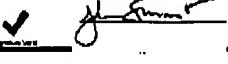
OFFICIAL

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John A. Smart
Signature	
Date	August 28, 2003

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	John A. Smart	Phone: (408) 884-1507
		Fax: (408) 490-2853
Signature		Date 08/28/2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.